

## **kynect ADVISORY BOARD**

### **Meeting Minutes**

**July 16, 2015**

#### **Call to Order and Roll Call**

The kynect Advisory Board met on Thursday, July 16, 2015, at 1:30 p.m. in Conference Room D at the Kentucky Office of Health Benefit and Health Information Exchange. Secretary Audrey Haynes, Chair, called the meeting to order at 1:45 p.m., and Miriam Fordham called the roll.

Board Members Present: Secretary Audrey Haynes, Chair; Gabriela Alcalde (by phone), David Allgood, Andrea Bennett (by phone), Jeff Bringardner (by phone), Dr. Joe Ellis (by phone), Carl Felix, Connie Hauser, Deborah Moessner (by phone), Tihisha Rawlins, Dr. John Thompson (by phone), Dr. Kathy Wheeler, Marcus Woodward (by phone), and Malea Hoepf Young. Commissioner Begley, Ruth Brinkley, Commissioner Sharon Clark, Donna Ghobadi, Commissioner Lee, and Julie Paxton were not present at the meeting.

Staff Present: Melea Rivera, Brenda Parker, Robin Uphoff, Lavina Johnson, D.J. Wasson (DOI)

#### **Approval of Minutes**

A motion was made to accept the minutes of the April 16, 2015 meeting, seconded, and approved by voice vote.

#### **Update on Kentucky Health Benefit Exchange Activities**

Lavina Johnson, Health Insurance Operations Manager, updated the members on the health benefit exchange activities. As a result of special enrollment period for those who were impacted by tax penalty, 3000 additional plans were enrolled through the exchange. The generation and mailing of 1095-A forms for the entire population has been completed. For 2015 calendar year, along with the 1095-A, there will also be a 1095-B generated and mailed. The 1095-B relates to Medicaid population, which is a much larger population than the qualified health plan population.

Melea Rivera, Assistant Director Policy Division, updated the board on plan certification. Eight issuers will be offering plans for the 2016 plan year. The office is currently working with the Department of Insurance for 2016 plan certification. DOI has transferred various company binders into the new plan management system. DOI completes the form review, rate review, and the Health Benefit Exchange along with the DOI completes the review of the statements of benefits and coverage. All but two issuers have added plans to plan management and currently working out any issues to get the last few in the system.

Lavina Johnson gave Open Enrollment Update. Open Enrollment will take place from November 1, 2015 to January 31, 2016 and it will be an improved passive enrollment for 2016 plan year.

Renewal notices will be revamped. Last year renewal notices only listed the plan individual was enrolled in, the current cost and the cost for the upcoming year. The new notices will target the county of enrolled individual by showing what insurance companies offer plans based on their location. The improved renewal notices will also encourage people to shop and take advantage of the new carriers in the market for 2016. There will also be more frequent open enrollment notices and reminders sent.

For 2016, the system will receive an IRS indicator if an individual did not reconcile their taxes. Individuals will need to attest that they reconciled for that calendar year. The Federally Facilitated Marketplace (FFM) will be using the same tool.

The mobile and tablet application will be released. It will offer beginning to end eligibility and enrollment into an MCO or a QHP. The tablet application will be geared towards the SHOP Market with emphasis on insurance agents. An agent and employer can create eligibility application and follow all the way through to creating a roster and enrolling employees into plans.

The System will now accommodate same sex marriage based on Supreme Court decision.

Only July 14, in person assister/navigator contracts and five exchange regulations were passed without any objection by legislators. The regulations include: Agent, In Person Assister/navigator, shop, appeals and shop appeals.

Melea Rivera gave update on advertisements. A new thirty second ad will air to target the individuals who were able to renew non-ACA plans early to avoid ACA impact. There are about 100,000 individuals who are still able to renew their non-ACA plans.

Secretary Haynes explained plan certification process which begins with issuers forwarding plan information to the Department of Insurance. Those plans go through actuarial certification, and sometimes plans pull back. When the issuer and Department of Insurance are satisfied, plans are then forwarded to the Exchange who, along with the DOI, reviews every plan to confirm they meet benefit thresholds. This is a very lengthy process.

## **Subcommittee Reports**

### **Behavioral Health Subcommittee**

Julie Paxton, Chair, is absent. Marcus Woodward, member of Behavioral Health Subcommittee, reports that they have not met since the last Advisory Board Meeting.

### Dental/Vision Subcommittee

Dr. Joe Ellis reported that the Dental/Vision Subcommittee have not met since last Advisory Board Meeting

### Education and Outreach Subcommittee

David Allgood, Chair, reported that the Education and Outreach Subcommittee held meetings on May 14, 2015 and July 9, 2015. There was a membership change on May 8, 2015. Reagan Hunt, with Kentucky Voices for Health, resigned her membership on the Education and Outreach Subcommittee. Additionally, Steven Linn, with Kentucky Youth Advocates has been nominated for membership and his nomination will be voted on at the committee's next meeting.

The new kynect Mobile App is scheduled to release in time for the next open enrollment period. Users will be able to apply for coverage and take applications from beginning to end on mobile devices.

The companion brochure for "How to kynect" health literature pamphlet is being drafted. The pamphlet will address how to best select an insurance plan. The pamphlet will discuss filter options on kynect shopping screens so consumers can find plans that work best for them.

Kiosk program is being revamped. Kiosk will instead be an avenue where consumers can provide contact information so that kynectors can get in touch with individuals to complete application.

Additionally, kynect's social media presence is increasing and expanding in hopes of drawing in the young invincible population and boosting overall viewership. This includes adding an Instagram account.

The next Education and Outreach Subcommittee meeting will be on September 17, 2015 at 10:00am.

### Navigator/Agent Subcommittee

Marcus Woodward, Chair, reported that the Navigator/Agent Subcommittee met on May 7, 2015 and July 9, 2015. The KHBE staff provided update on exchange activities and system enhancements and reported on success of Special Enrollment period and the 1095-A. The Department of Insurance and Exchange staff have begun reviewing qualified health plans.

The subcommittee has experienced a number of membership changes in the past few months but do not have report of actual changes. All agents' organizations and kynector organizations are represented.

Representatives from GoHealth, a web broker entity that participates in Federally Facilitated Marketplace (FFM), has requested to participate in kynect. Members of subcommittee

discussed whether web brokers should be able to participate on kynect. After deliberation and two separate meetings, Navigator/Agent Subcommittee recommends: To maintain current system, which prohibits web broker access, it is recommended, that subcommittee re-addresses issue of web broker participation if there is a need to create more robust distribution system in the future.

Next meeting is tentatively scheduled for Sept 17, 2015.

#### Qualified Health Plans Subcommittee

Deborah Moessner, Chair, reported that the Qualified Health Plans Subcommittee met on July 16, 2015. The main issue for consideration was the allowance of excess of the essential health benefits for qualified health plans.

The Plan Benefits Task Force held meetings on May 11, 2015 and May 27, 2015. The Qualified Health Plan Subcommittee considered a recommendation by the Plan Benefits Task Force to allow issuer to offer benefits on the exchange in excess of the essential health benefits for the plan year 2017. The Subcommittee approved the following recommendation: The Qualified Health Plan Subcommittee recommends the Kentucky Office of Health Benefit and Information Exchange amends administrative regulation 900 KAR 10:010 to permit beginning plan year 2017 an issuer certified to offer a qualified health plan on the Kentucky Health Benefit Exchange to include benefits in excess of the essential health benefits provided that the issuer also offers a corresponding qualified health plan on the exchange of the same metal level that is limited to the essential health benefits.

At this point no follow up meeting has been scheduled.

#### Small Employer Health Options Program (SHOP) Subcommittee

Jeff Bringardner, Chair, reported that the Small Employer Health Options Program (SHOP) Subcommittee has not met since last Advisory Board Meeting. They are in the process of auditing group to see who wants to continue to participate. Received responses from most members and meeting should convene in the near future.

Lavina Johnson provided a SHOP update. In May, kynect released a new and improved SHOP system with increased flexibility, more intuitive application, more ability for the office to update enrollments and effective dates all while communicating with the insurers.

#### **Other Business**

Secretary Haynes called to vote Navigator/Agent Subcommittee recommendation:

To maintain current system, which prohibits web broker access, it is recommended, that subcommittee re-addresses issue of web broker participation if there is a need to create more robust distribution system in the future.

A motion was made to approve the recommendation, seconded, and approved by voice vote.

Secretary Haynes called to vote the recommendation of the QHP Subcommittee:

The Qualified Health Plan Subcommittee recommends the Kentucky Office of Health Benefit and Information Exchange amends administrative regulation 900 KAR 10:010 to permit beginning plan year 2017 an issuer certified to offer a qualified health plan on the Kentucky Health Benefit Exchange to include benefits in excess of the essential health benefits provided that the issuer also offers a corresponding qualified health plan on the exchange of the same metal level that is limited to the essential health benefits.

A motion was made to approve the recommendation, seconded, and approved by voice vote.

A motion to accept all committee reports, seconded, and approved by voice vote.

Dr. Joe Ellis asked if an employer with 50+ employees offers insurance, would subsidies or eligibility for Medicaid be provoked to their employees?

Secretary Haynes suggested a presentation be created to cover detailed information about SHOP to get a better answer to the question

Marcus Woodward made suggestion to create a pamphlet to hand out to employers detailing SHOP information.

Since Miriam Fordham is retiring July 30, 2015, the Chair and Board Members thanked her for her service to the board and the exchange.

Next quarterly meeting is scheduled for October 15, 2015 at 1:30.

### **Adjournment**

Secretary Haynes made motion for adjournment, seconded, approved by voice vote.